Fill in this information	n to identify your case:	
Debtor 1	Robert Rivera	
Debtor 2 (Spouse, if filing)	Eduardo Rivera	
United States Bankro	uptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
	2-07267	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Forr	<u>n 106l</u>	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your amployment					
Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse		
If you have more than one job,	Employment status	■ Employed	■ Employed		
attach a separate page with information about additional	Employment status	☐ Not employed	□ Not employed		
employers.		Behavioral Health Care			
Include part-time, seasonal, or	Occupation	Manager	Consultant		
self-employed work.	Employer's name	Sentara	University of the South		
Occupation may include student					
or homemaker, if it applies.	Employer's address	6015 Poplar Hall Dr	735 University Avenue		
		Norfolk, VA 23502	Sewanee, TN 37383		
	How long employed the	nere? 4 days	4 years		

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 5,760.00 10,000.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 3. +\$ Calculate gross Income. Add line 2 + line 3. 10,000.00 5,760.00

Official Form 106I Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	Robert Rivera Eduardo Rivera	_		Case	number (if k	nown)	22-0	07267			
	Con	vy line 4 hore	4		Fo:	r Debtor 1	0.00		r Debtor n-filing s	pouse		
	Cop	y line 4 here	4.		Φ_	10,00	0.00	Φ_	5 ,	,760.0	<u>U</u>	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	2,88	7.33	\$		0.0	0	
	5b.	Mandatory contributions for retirement plans	5b).	\$	(0.00	\$		0.0	0	
	5c.	Voluntary contributions for retirement plans	50).	\$	(0.00	\$		0.0	0	
	5d.	Required repayments of retirement fund loans	50	d.	\$		0.00	\$		0.0	0	
	5e.	Insurance	5e	€.	\$		0.00	\$		0.0	0	
	5f.	Domestic support obligations	5f		\$_		0.00	. \$_		0.0		
	5g.	Union dues	50		\$_		0.00	. \$_		0.0		
	5h.	Other deductions. Specify:	5h	1.+	\$_		0.00	+ \$_		0.0	0	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	2,88	7.33	\$_		0.0	0	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	7,11	2.67	\$_	5	,760.0	0	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-		•			•			_	
	O.I.	monthly net income.	88		\$_		0.00	\$_		0.0		
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8b		\$_ \$		0.00	\$_ \$_		0.0	_	
	8d.	Unemployment compensation	80	d.	\$		0.00	\$		0.0	_	
	8e.	Social Security	86	€.	\$		0.00	\$		0.0		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Adoption Subsidy State of Illinois	8f		\$_	1,46	7.00	\$_		0.0		
	8g.	Pension or retirement income	80		\$_		0.00	\$_		0.0		
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_		0.00	+ \$_		0.0	0	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	1,46	7.00	\$_		0.	00	
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		8,579.67	+ \$	5	,760.00	= \$	14	339.67
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		* -		0,010101	1 1 1		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*	,	
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					•	Schedule	e J. +\$ _		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaies							e. 12.	\$Coml	oined	
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?							mont	illy in	come
		Yes. Explain:										

Fill	in this informa	ation to identify yo	our case:					
Deb	otor 1	Robert Rive	ra			Che	eck if this is:	
							An amended filing	
Deb	otor 2	Eduardo Riv	era					wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ted States Bank	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
1	se number 22 (nown)	2-07267						
0	fficial Fo	orm 106J						
S	chedule	J: Your	Exper	nses				12/1
Be	as complete ormation. If m	and accurate as	s possible eded, atta	. If two married people ar ich another sheet to this				
Par		ribe Your House	ehold					
1.	Is this a join ☐ No. Go to							
			in a conor	ate household?				
			ın a separ	ate nousenoid?				
			-1 (") - 0(" -1				kten 0	
	■ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	s for Separate House	hold of De	btor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		8	Yes
								□ No
					Son		13	Yes
							4.0	□ No
					Son		13	Yes
								□ No
3.	expenses of	penses include of people other t d your depende	han _	No Yes				☐ Yes
		nate Your Ongoi						
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				
the	lude expense value of suc ficial Form 10	h assistance an	non-cash d have ind	government assistance i cluded it on <i>Schedule I:</i> \	f you know our Income		Your exp	enses
4.		or home owners nd any rent for th		uses for your residence. I or lot.	nclude first mortgage	4.	\$	2,200.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	14.00
	4c. Home	e maintenance, re	epair, and ι	upkeep expenses		4c.	·	40.00
	4d. Home	eowner's associa	tion or con-	dominium dues		4d.	\$	0.00

4d. \$

0.00

5. \$

Additional mortgage payments for your residence, such as home equity loans

	se numi	ber (if known)	22-07267
Utilities:			
6a. Electricity, heat, natural gas	6a.	·	0.00
6b. Water, sewer, garbage collection	6b.	\$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	· -	0.00
6d. Other. Specify:	6d.	·	0.00
Food and housekeeping supplies	7.	\$	631.00
Childcare and children's education costs	8.	\$	500.00
Clothing, laundry, and dry cleaning	9.	\$	99.00
). Personal care products and services	10.	\$	45.00
. Medical and dental expenses	11.	\$	400.00
2. Transportation. Include gas, maintenance, bus or train fare.	40	c	320.00
Do not include car payments.	12.	· <u> </u>	
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
4. Charitable contributions and religious donations	14.	\$	0.00
5. Insurance. Do not include incurance deducted from your pay or included in lines 4 or 20			
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15a. 15b.	*	0.00
15c. Vehicle insurance	15b.	·	0.00
15d. Other insurance. Specify:	15d.	·	0.00
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	_ 13u.	Ψ	0.00
Specify:	16.	\$	0.00
7. Installment or lease payments: 17a. Car payments for Vehicle 1	17a.	\$	839.04
17b. Car payments for Vehicle 2	17b.	·	0.00
17b. Cal payments for vehicle 2 17c. Other. Specify:	17b.	:	
17d. Other. Specify:	17d.	*	0.00
, ,	_ 17 u .	»	0.00
3. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. Other payments you make to support others who do not live with you.		\$	0.00
Specify:	19.	<u> </u>	
Other real property expenses not included in lines 4 or 5 of this form or on Schedul	_	our Income.	
20a. Mortgages on other property	20a.		0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00
1. Other: Specify: Vehicle Registration	21.	+\$	30.00
2. Calculate your monthly expenses	ļ		
22a. Add lines 4 through 21.	ļ	\$	5,218.04
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	7,057.50
22c. Add line 22a and 22b. The result is your monthly expenses.	ļ	\$	12,275.54
3. Calculate your monthly net income.			
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	14,339.67
23b. Copy your monthly expenses from line 22c above.	23b.	-\$	12,275.54
22a Cubtract your monthly avacage from your monthly income	,		
 Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23c.	\$	2,064.13
	: _ 4 ₂	form?	
4. Do you expect an increase or decrease in your expenses within the year after you fill For example, do you expect to finish paying for your car loan within the year or do you expect your mondification to the terms of your mortgage? No.	rtgage p	payment to incre	ease or decrease because of a

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		ert Rivera ardo Rivera			Cas	e number	(if known)	22-07	267
Fill	in this inform	ation to identify yo	our case:						
Deb	otor 1	Robert River	а			Check if th			
							mended filii	Ü	
	otor 2 ouse, if filing)	Eduardo Riv	era				oplement sl nses as of		oostpetition chapter 13 wing date:
Unit	ted States Bank	kruptcy Court for the	NORTH	HERN DISTRICT OF ILLIN	OIS	MM /	DD / YYY	7	
	se number nown)	22-07267							
O	fficial Fo	orm 106J-	2						
S	chedule	J-2: You	r Exp	enses for Sepa	arate Househ	old o	f Debt	tor 2	12/15
Del fori spa Ans	btor 2 have on the second of t	one or more deper respect to expend, attach another question.	endents in ses for De sheet to	sehold expenses ONLY in common, list the dependent of the top of a this form. On the top of a	dents on both Schedul ted on Schedule J. Be	e <i>J and t</i> as comp	his form. lete and a	Answer ccurate	the questions on this as possible. If more
Par	t 1: Desc	cribe Your House	enold						
1.		d Debtor 1 maint Do not complete		ate households?					
2.	Do you hav	ve dependents?	□No						
	list all other	s of Debtor 2 of whether dependent on	■ Yes.	Fill out this information for each dependent	Dependent's relations Debtor 2	nip to	Depende age	nt's	Does dependent live with you?
	Do not state	e the							□ No
	dependents	s names.			Son		8		■ Yes
									□ No
					Son		13		■ Yes
									□ No
					Son		13		Yes
									□ No
3.	Do vour ov	penses include	_						☐ Yes
J.	expenses	of people other t nd your depende	han _	l No l Yes					
Dar	t 2: Estir	nate Your Ongoi	na Month	ly Evnances					
Est	imate your e	expenses as of your address as a second to the last	our bankr	uptcy filing date unless y	ou are using this form	as a sup	plement in	a Chap	ter 13 case to report
				government assistance i on Schedule I: Your Incor		Yo	our expens	es	
4.		or home owners and any rent for th		nses for your residence. I or lot.	nclude first mortgage	4. \$			2,800.00
	If not inclu	ided in line 4:							
	4a. Real	estate taxes				4a. \$			0.00

	tor 1 tor 2	Robert Rivera Eduardo Rivera	Case num	ber (if known)	22-07267
	4b.	Property, homeowner's, or renter's insurance	4b.	\$	33.50
	4c.	Home maintenance, repair, and upkeep expenses	4c.	·	80.00
	4d.	Homeowner's association or condominium dues	4d.	·	0.00
5.	Addi	itional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilit				.=
	6a.	Electricity, heat, natural gas	6a.	·	150.00
	6b.	Water, sewer, garbage collection	6b.		175.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	444.00
_	6d.	Other. Specify:	6d.	· -	0.00
7.		d and housekeeping supplies	7.	\$	2,000.00
8.		dcare and children's education costs	8.	\$	0.00
9.		hing, laundry, and dry cleaning	9.		200.00
		onal care products and services	10.	·	150.00
		ical and dental expenses	11.	\$	200.00
12.		sportation. Include gas, maintenance, bus or train fare.	12.	\$	350.00
12		ot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
14.		ritable contributions and religious donations	14.	· -	0.00
		rance.	14.	Ψ	0.00
15.		ot include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	\$	0.00
	15b.	Health insurance	15b.	\$	0.00
		Vehicle insurance	15c.	· -	400.00
		Other insurance. Specify:	15d.	·	0.00
16.		es. Do not include taxes deducted from your pay or included in lines 4 or 20.		·	0.00
	Spec		16.	\$	0.00
17.	Insta	allment or lease payments:			
	17a.	Car payments for Vehicle 1	17a.	\$	0.00
	17b.	Car payments for Vehicle 2	17b.	\$	0.00
		Other. Specify:	17c.	\$	0.00
18.		r payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
19.	Othe	er payments you make to support others who do not live with you.		\$	0.00
	Spec	·	19.		
20.		er real property expenses not included in lines 4 or 5 of this form or on Sche			
		Mortgages on other property	20a.	·	0.00
		Real estate taxes	20b.	·	0.00
		Property, homeowner's, or renter's insurance	20c.		0.00
		Maintenance, repair, and upkeep expenses	20d.	·	0.00
		Homeowner's association or condominium dues	20e.	Ψ	0.00
21.	Othe	er: Specify: Pet Expenses	21.	+\$	75.00
22.	Your	r monthly expenses. Add lines 5 through 21.		\$	7,057.50
		result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedu ulate the total expenses for Debtor 1 and Debtor 2.	lle J to		
23.	Line	not used on this form.			
	Do y	rou expect an increase or decrease in your expenses within the year after you expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			ase or decrease because of a
	■ N				

Explain here:

☐ Yes.